LIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTEREST SECEIVED Official Use Only FAIR POLITICAL COVER PAGE PRACTICES COMMISSION 2012

Date Received
Official Use Only

Please type or print in ink.

NAME OF FILER HARMAN	(FIRST) (MIDDLE)
1. Office, Agency, or Court	
Agency Name	ATE
STATE SENT Division, Board, Department, District, if applicable 35 D13	Your Position 5 TRICT
▶ If filing for multiple positions, list below or on an attachment.	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
	Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County	County of
☐ City of	·
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2011, through December 31, 2011.	Leaving Office: Date Left///
-or- The period covered is/, througon December 31, 2011.	gh O The period covered is January 1, 2011, through the date of leaving office.
Assuming Office: Date assumed/	The period covered is
Candidate: Election Year Office sought,	if different than Part 1:
4. Schedule Summary	
_	otal number of pages including this cover page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - <i>No reportable ii.</i>	interests on any schedule
I certify under penalty of perjury under the laws of the State of Cal	
Date Signed FEb 16, 2012	Signature

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name	HARI	MAN

NAME OF BUSINESS ENTITY Applied Waterials	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
na Li	Marland
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
(Describe) Partnership (Discourse Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1,14,11 3,22,11	1,18,11 7,3,11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Famals Life Science
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
1	Medical Equip
Computers	
FAIR MARKET VALUE ☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	FAIR MARKET VALUE \$\infty\$ \$2,000 - \$10,000
☐ \$2,000 - \$10,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1,26,11 3,22,11	2,7,11 7,13,11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Formas Life Science	NAME OF BUSINESS ENTITY AMGEN
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
MEdical Egyp	Phaama.
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
3,9,11 7,13,11	5,17,11 7,13,11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
,	1
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

		FORM	
FAIR POL	ITICAL PI	RACTICES CO	MMISSION
Name			

Tom HARMAN

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
.1	O /
HEROS PACE	\cup
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$\frac{1}{2}\$\$10,001 - \$100,000 \$\frac{1}{2}\$\$10,001 - \$1,000,000 \$\frac{1}{2}\$\$
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock □ Other □
(Describe) Partnership (Oncome Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
5 P MORGAN CHASE + CO	Qua comm Inc
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FINANCIA	Qualromm Inc
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O moonie received on 3500 on whole (Report on Schedule C)	O Income Received of \$300 of More (Report on Scriedille C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>, , 11 </u>	1,, 11 3, 22, 11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Alcoa Hluminium	VENIZON
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Aluminium	TELEPHONE
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT ▼ Stock □ Other
Stock Other (Describe)	Stock Other (Oescribe)
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1 / 34 / 11 8 / 9 / 11	1,14,11 8,9,11
ACQUIRED DISPOSED	ACQUIRED DISPOSED
ı	Ĭ

Comments: _

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM
FAIR POLITICAL PRACTICES COMMISSION
Name Tom HALMAN

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
3 P MORGAN CHASE & CO	Intel
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
\mathcal{F}	
tinancial	Computer Chips
FAIR MARKET VALUE	FAIR MARKET VALUE
∑ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	X \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Describe)
Partnership O Income Received of \$0 - \$499	Partnership () Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1,14,11 8,9,11	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AMERICAN EXPRESS	$AT \star T$
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FINANCIAL	Total
ICHANCIAI	TELEPHONE
FAIR MARKET VALUE	FAIR MARKET VALUE
∑ \$2,000 - \$10,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
1, 4, 11 8, 9, 11	1,3,11 8,9,11
	1,3,11 8,9,11 ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
1	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> </u>
// 11// 11	/
,,ogonico bidi odeb	NOGOTIED DIOLOGED
Comments:	

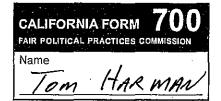
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORN	NIA FORM 700
FAIR POLITICA	L PRACTICES COMMISSION
Name Tom	HARMAN

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
HARMAN FAMILY TRUST UTD 10-25-93	HARMAN FAMILY TRAST UTO 10-25-93
HARMAN FAMILY TRUST UTD 10-25-93 Name STATE FAPITE LOOM 5094	HARMAN FAMILY TRAST UTO 10-25-93 Name STATE GAP 101 KOOM 5094
SAC LAMENTO, CA 95814	GACRAMENTO, CA 95814
Address (Business Address Acceptable) [*] Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
Sole Proprietorship Partnership Other	Sole Proprietorship Partnership
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499	\$0 - \$499
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ !NVESTMENT X REAL PROPERTY	☐ INVESTMENT
9 JOEGI COURT	2959 WEST RIVER ROAD
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if investment, or Assessor's Parcel Number or Street Address of Real Property
SACRAMENTO, CA Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

SCHEDULE D Income - Gifts



LITY of HUNTINGTON BEACH	John WAYNE AIR PORT
ADDRESS (Business Address Acceptable)	ADDRESS (Bysiness Address Acceptable)
2000 MAIN ST HUNT, Buh, CA BUSINESS ACTIVITY, IF ANY, OF SOURCE	3160 AIRWAY AVE COSTA MESA, CA BUSINESS ACTIVITY, IF ANY, OF SOURCE
	AIR PORT
MUNICIPAL GOV'T DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1, 10, 11 s 125 PARKING PASS(2)	12, 15, 11 s 420 PARKING PASS
	s
\$	
Yoch A DehE WINTHN NATION	NAME OF SOURCE CALIFORNIA INDEPENDENT PETROLEUM ASSE ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Acceptable)	
14455 HIGHWAY 16 BROOKS, CA BUSINESS ACTIVITY, IF ANY, OF SOURCE	1001 KSTREET SALRAMENTO CA
TRIBAL	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
5,23,11 , 255.0 Golf green fees	12, 1, 11 , 25000 Golf green fees
NAME OF SOURCE CALGORNIA TROUT	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
870 MARKET STREET SAN FRANCISCO, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
NONDROSIT CHARITY	Territoria especialista de la companya de la compa
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
10,26 11 : 10000 ShIRT	
	\$
Comments:	
Comments.	

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RECEIVED FAIR POLITICAL PRACTICES COMMISSIONSCHEDULE D 2012 MAR - | PM 4:50 Income - Gifts



CALIFORNIA FORM / UU FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

NAME OF SOURCE CBIA/Cacifornia Building Industry A. ADDRESS (Business Address Acceptable) 1215 K Street, Suite 1200, Sac, CA, 95 BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 4, 26, 11 s 101.42 DINNER Spatare
NAME OF SOURCE (A Center for Civic Participation ADDRESS (Business Address Acceptable) 1220 H Street, Suik 102, Sac, CA 958
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 5 31 2011 s C LUNCH WEAL
Filer's Verification Print Name Tom Harman
Office, Agency or Court
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed